



#9/160E
A34349 (072824.0116) 6/13/03

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Jean-Paul Meraldi

Serial No.: 09/883,039

Examiner: Justin Fischer

Filed: June 15, 2001

Group Art Unit 1743

For: TIRE REINFORCED BY AN ELONGATE COMPOSITE
OF THE MONOFILAMENT TYPE, AND SUCH ELEMENT

RECEIVED
JUN 11 2003
GROUP 1700

RESPONSE TO RESTRICTION REQUIREMENT

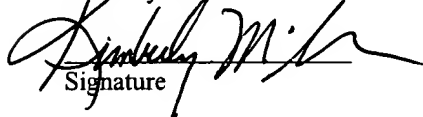
CERTIFICATE OF MAILING

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June 5, 2003
Date of Deposit

Kimberly J. McGraw
Attorney Name

50,994
Patent Reg. No.


Signature

June 5, 2003
Date of Signature

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This is in response to the Office Communication dated May 15, 2003 in the above-identified application in which the Examiner issued a restriction requirement. The Examiner has placed the claims into three groups as follows:

1743
1933

BAKER BOTTS LLP

Please type a plus sign (+) inside this box → ☐



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

| | |
|------------------------|-------------------|
| Application Number | 09/883,039 |
| Filing Date | June 15, 2001 |
| First Named Inventor | Jean-Paul Meraldi |
| Group Art Unit | 1743 |
| Examiner Name | Justin Fischer |
| Attorney Docket Number | A34349 |

Total Number of Pages in This Submission

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ENCLOSURES (check all that apply)

- | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Response to Restriction Requirement |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Remarks



NO FEE

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | |
|-------------------------|--------------------------------------------------------------|-------------------------------------------------|
| Firm or Individual name | BakerBotts LLP 30 Rockefeller Plaza New York, NY 10112 | |
| Signature | | Att Name: Kimberly J. McGraw PTO Reg: 50,994 |
| Date | June 5, 2003 | |

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| Typed or printed name | Kimberly J. McGraw | |
| Signature | | Date June 5, 2003 |